UTILITY Attorney Docket No. 203491US2S						
PATENT APPLICATION	non Identifier Masatoshi SUZUKI					
TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))	TRANSMITTAL TITLE INFORMATION TRANSMISSION NETWORK SYSTEM AND ITS TRAFFIC					
	Assignee Name:					
4	Assignee Address.				170	
* APPLICATION ELEMEN See MPEP chapter 600 concerning utility patent	TS application contents	ADDRESS TO:	Assistant Comm Box Patent Appli Washington, DC	issioner for Patents	u.s. 188593	
1 Fee Transmittal Form (e.g. PTO/SE	3/17)	100	OMPANYING APPL		929	
(Submit an original and a duplicate for fee p	rocessing)				<u> </u>	
= 0		-	ment Papers (cover		(s))	
Specification Total	Sheets 32		ation Data Sheet. S			
■ ■ w		9. 🗆 37 C.F	.R. §3.73(b) Statem ere is an assignee)	ent Power of	Attorney	
= ₩	Sheets (Formals)	1	Translation Docum			
= 0		11. Information Statem	ation Disclosure nent (IDS)/PTO-144	g Copies of Citations	f IDS	
 ■ Oath or Declaration Total 	l Pages 2	12. □ Prelimi	nary Amendment			
 a. Newly executed (original or cop 	oy)	13. W hite	Advance Serial No.	Postcard		
b. Copy from a prior application (3 (for continuation / divisional w/ box	37 C.F.R, §1.63(d)) 17 completed)	14. ■ Certifie	ed Copy of Priority D	ocument(s) (1)		
 DELETION OF INVENTO Signed statement attached delethe prior application, see 37 C.f 1 33(b) 	DR(S) eting inventor(s) named in F.R §1.63(d)(2) and	15. □ Applica See 37	ant claims small ent CFR 1.27	ity status.		
5. CD-ROM or CD-R in duplicate, larg Program (Appendix)	e table or Computer	16. ■ Other	Notice of Priority	′		
6. Nucleotide and/or Amino Acid Sequ	ience Submission					
(if applicable, all necessary) a. □ Computer Readable Form (CR	F)	1				
b. Specification or Sequence Listing o	*	ł				
		}				
i. ☐ CD-ROM or CD-R (2 cop ii. ☐ Paper	ies), oi	s); or				
c. Statements verifying identity of	above conlec					
		L				
 If a CONTINUING APPLICATION, chec Continuation Divisional 	k appropriate box, and sup. Continuation-		mation below of prior applicatio			
		iii-part (Cir)				
Prior application information: Examiner: For CONTINUATION OR DIVISIONAL APPS only. The entire declosure of the prior application, from which an eath or declaration is supplied under Dox 4b is correctived a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation sign only: be relied upon when a portion has been inadvired they omitted from the submitted application parts.						
considered a part of the accompanying continuation or when a portion has been inadvertently omitted from the	divisional application and is submitted application part	hereby incorporated	by reference. The inco	rporation <u>can only</u> be r	elied upon	
18. Amend the specification by inserting bef	ore the first line the se	ntence:				
☐ This application is a ☐ Continuation		☐ Continuatio	n-in-part (CIP)			
of application Serial No.	Filed on					
 □ Which was published in English □ Which was not published in English 						
☐ This application claims priority of provis	ional application C-=:-	LNo	F:	led		
This application claims priority of provis	application Sells	1110.				
	19. CORRESPOND	ENCE ADDRES	S			
2285 0						
(703) 413-3000 FACSIMILE: (703) 413-2220						
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١	Name:	Marvin J. Spivak	Registration No.:	24,913
	Signature:	6 mm M Erran	Date:	421/01
ı	Name:	C. Irvin McClelland	Registration No.:	
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

DVENTOR(S) Masatoshi SUZUKI

SERIAL NO:

New Application

FOR:

FILING DATE: Herewith

INFORMATION TRANSMISSION NETWORK SYSTEM AND ITS TRAFFIC CONTROL METHOD

NODE EQUIPMENT

FEE TRANSMITTAL

ASSISTANT COMMISSIONER FOR PATENTS WASHINGTON, D.C. 20231

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	9 - 20 =	0	× \$18 =	\$0.00
INDEPENDENT CLAIMS	3 - 3 =	0	× \$80 =	\$0.00
□ MULTIPLE DEPENDE	MULTIPLE DEPENDENT CLAIMS (If applicable) + \$270 =			
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BASIC FEE				\$710.00
	\$710.00			
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The Commissioner is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

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